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CONFIRMATION NO. 2707

SERIAL NUMBER 10/066,162	FILING DATE 01/31/2002  RULE	CLASS 607	GROUP ART UNIT 3739	ATTORNEY DOCKET NO. HARRIS-00101
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

YES A.R.

This appln claims benefit of 60/270,958 02/21/2001

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

NONE

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 03/27/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	CA	7	42	3
Allowance <i>David M. Harris</i> Examiner's Signature Initials				

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## TITLE

Method of periodontal laser treatment

FILING FEE  RECEIVED 568	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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